

S&H Form: PTO/SB/30 (12/04)

REQUEST FOR CONTINUED EXAMINATION (RCE)

TRANSMITTAL

(INCLUDING FILING FEE AND/OR PETITION FOR EXTENSION OF TIME FEE)

Subsection (b) of 35 U.S.C. §132, effective May 29, 2000 provides for continued examination of a utility or plant application filed on or after June 8, 1995.

See The American Inventors Protection Act of 1999 (AIPA)

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To: Commissioner for Patents Box RCE PO Box 1450 Alexandria, VA 22313-1450		Attorney Docket No.:1083.1083							
First Named	Hisao NAITOH								
Inventor									
Application No.	09/902,583	Group Art Unit	2131						
Filing Date	July 12, 2001	Examiner	ABRISHAMKAR, KAVEH						
CPA Filing Date	-	Confirmation No	9449						
Title of Invention	COMPUTER VIRUS INFECTION INFORMATION PROVIDING METHOD, COMPUTER VIRUS INFECTION INFORMATION PROVIDING SYSTEM, INFECTION INFORMATION PROVIDING APPARATUS, AND COMPUTER MEMORY PRODUCT								
This is a Request for Continued Examination (RCE) under 37 C.F.R. §1,114 of the above-identified application.									
1.									
Submission required under 37 C.F.R. §1.114 (Box a or b must be completed) a.									
		Liddel Collins	MAILUEN .						

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790.00 OP



BASIC FEE				\$ 790.00				
is hereby made which the requ	al Action set an get for an extension isite fee is enclose (\$0); (4 months (\$	of time	ne to cover t month (\$120	he date 0)); (2 m	this RCE is onths (\$450	filed, for		
Claims As Claims Remaining Amended After Amendment		Highest Number Previously Paid For		Number Extra	Rate			
Total Claims	9	20	- 20 =	0	X \$ 50.0	0 =		\$ 0.00
Independent Claims	7	7	- 3 =	0	X \$ 200.	00 =		\$ 0.00
Suspension Fe	e (\$130.00)							
Total of above Calculations =								790.00
Reduction by 50% fo	or filing by small entity (Note 37 (C.F.R. 1.9, 1.27,	1.28).				
TOTAL FEES DUE =							\$	790.00
A chec Charg 7. GENERAL The Common 37 C.F.R. pursuant	still proper and is no longer class of the second is no longer class. OF PAYMENT of the amount of t	of \$ \$7 DUE" FION horized to during the aintain personal control of the control o	790.00 is er to Deposit A	Account payment or	charge any add	ditional fees un	der 37 C.F.R.	1.16 (filing fees) or
8. CORRESI	PONDENCE AL	DDRE	SS					
				R HALSI HALSI 1171 FRADEMARK OF				
9. SIGNATU	RE OF ATTOR	NEY (OR AGENT	REQU	IRED			
NAME	Thomas L. Jo				1	ATION NO	. 53,908	
SIGNATURE	Thomas	7. J	The state of the s		DATE	10/0	4/06	
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